Approved for use through 10/31/2002. OMB 0651-0032

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24540-74222US

UTILITY PATENT APPLICATION TRANSMITTAL

First Named Inventor VOLFKOVICH, et al POSITIVE ELECTRODE OF AN ELECTRIS Title

(Only for new nonprovisional applications under 37 CFR 1.53(b))

DOUBLE LAYER CAPACITOR

Express Mail Label No.

ADDRESS TO:

Attorney Docket No.

EV222868062US

MAIL STOP APPLICATION

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

- [X] Fee Transmittal Form (e.g. PTO/SB/17)
- (Submit an original and a duplicate for fee processing) 2. [X] Applicant claims small entity status. See 37 CFR 1.27.
- 3. [X] Specification

Total Pages

[17]

[]

(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Description of the Drawings (if filed)
- **Detailed Description**
- Claim(s) (Nos. 1-21)
- Abstract of the Disclosure
- 4. [X] Drawing(s) (35 U.S.C. 113) Total Pages [4]
- 5. [] Oath or Declaration Total Pages
 - a. [] Newly executed (original or copy) b. [] Copy from a prior application (37 CFR 1.63(d))
 - (for continuation divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
 - ☐ Signed statement attached deleting inventor(s) named in the prior application (see 37 CFR) 1.63(d)(2) and 1.33(b)
- 6. [X] Application Data Sheet. See 37 CFR 1.76

PO Box 1450 Alexandria, VA 22313

Computer Program (Appendix)

Nucleotide and/or Amino Acid Sequence Submission 8. [] (if applicable, all necessary)

CD-ROM or CD-R in duplicate, large table or

-] Computer Readable Form (CRF)
- b. [] Specification Sequence Listing on:
 - CD-ROM or CD-R (2 copies); or
 - ii. 🗆 paper
- c. [] Statements verifying identity of above copies

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- Assignment Papers (cover sheet & document(s)) 10. [] 37 CFR 3.73(b) Statement [] Power of Attorney
 - (when there is an assignee)
- English Translation Document (if applicable) 11. []
- [] Copies of IDS 12. [] Information Disclosure Citations Statement (IDS)/PTO-1449
- 13. [] Preliminary Amendment
- 14. [X] Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 15. [] Certified Copy of Priority Document(s)
- (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i).
- 16. [] Applicant must attach form PTO/SB/35 or its equivalent.
- 17. [X] Other: check in amount of \$385.00 representing required filing fee.

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

[] Continuation

[] Divisional Examiner: [] Continuation-in-part (CIP) of prior application No.:

Prior application information: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS ONLY: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relief upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS Name Evelyn H. McConathy, Esquire Dilworth Paxson LLP Address 3200 Mellon Bank Center-1735 Market Street Philadelphia City State 19103 Zip Code Country (215) 575-7000 Telephone Fax (215) 575-7200 Name (Print/Type) Evelyn H. McConathy Registration No. (Attorney/Agent) 35,279 Signature Evelyn H. Mc Consthy April 8, 2004 Date

ENSSS8P80PSN2

PTO/SB/17 (11-01)

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FEE TRANSMITTAL Application Number To Be	Complete if known Application Number To Be Assigned					
C TSV 2004	Filing Date Herewith					
	OVICH, et al.					
Patent fees are subject to annual revision. Examiner Name TBA	,					
☑ Applicant claims small entity status. See 37 CFR 1.27 Group Art Unit TBA						
TOTAL AMOUNT OF PAYMENT (\$394.00) Attorney Docket No. 24540-	Attorney Docket No. 24540-74222US					
METHOD OF PAYMENT (check all that apply) FEE CALCUL	FEE CALCULATION (continued)					
STATE OF THE STATE	3. ADDITIONAL FEES					
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	ing fee under 37 CFR 1.17(q)					
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Total Claims 21 20 = 1 X 9 = \$ 9 1809 770 2809 385 Filing a CFR §	submission after final rejection (37 1.129(a))					
	h additional invention to be examined R § 1.129(b))					
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Other fee (specify) 1202 18 2202 9 Claims in excess of 20						
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1205 18 2205 9 **Reissue claims in excess of 20 and over original patent						
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**or number previously paid, if greater; For Reissue, see above						
	Complete (if applicable)					
Name (Print/Type) Evelyn H. McConathy Registration No. (Attorney/Agent) 35,279 Signature Evelyn H. McConathy	Telephone (215) 575-7000					
Signature Evelyn H. McConothy.	Date April 8, 2004					